

Thank you again for joining us today. My name is Chelsea Parsons, and I'm a consultant with Guidehouse, supporting CDC'S OneLab Initiative. I have a couple of notes to share with everyone before we kick off the webinar today.

If you're having any technical issues throughout the session or if you have any colleagues that might be having any technical issues, you can reach out to our OneLab inbox. It's OneLab@cdc.gov, OneLab@cdc.gov. You'll see that pop up in the chat right now. You can always reach out to us throughout the session or even after, if you're having any questions.

But if you are having questions for our presenters today during the session, please take a look at your lower ribbon in your Zoom page. You'll see a Q&A function. That's where you can submit any questions you're having today. We encourage you to submit them throughout the entire session as questions arise. We'll have a 10-minute Q&A session at the end of the webinar today. And we'll try to get to as many questions as we can. If you do submit a question, and we aren't able to get to it today, as long as you don't submit it anonymously, we'll try and send you an email back with the answer to that question. And if you have any questions following the session, you can always send those to our inbox as well.

Just a reminder that all this material will be posted live in about two weeks, so if you'd like to share with colleagues afterwards, or if you want to watch it back, it'll be posted to our website in about two weeks.

So let's go ahead into our agenda for today's session. If you need closed captions throughout this session, we provide those. You'll see a link popping up in the chat. Just to note, that you'll need to keep this window open, as well as those closed captions. So those are available for you if you need them.

All right, so today, we're going to start by talking about new OneLab resource. We'll also go through some introductions to our presenter that we have joining us today. And then, like I mentioned, we'll have that 10-minute Q&A following the main presentation. And then Alicia, our OneLab Network lead will close us out with some announcements. So I'm going to go ahead and pass it over to Alicia to introduce us to some resources and today's presenter. Alicia?

Thank you, Chelsea. Before we start the main presentation, I'd like to take a moment to share a new OneLab basic level course, Fundamentals of Communicating Hazards of Laboratory Chemicals. It's designed for clinical and public health laboratory professionals, as well as safety professionals and others who work stored. At the end of the course, you should be able to understand the functions of OSHA's hazard communication standard and its role in providing information to laboratory staff regarding the dangerous properties of chemicals used in the laboratory. You can earn one PACE credit for registering and completing this course on OneLab REACH. Next slide, please.

I'll now read our disclaimer. The slide decks may contain presentation material from panelists who are not affiliated with CDC. Presentation content from external panelists may not necessarily reflect CDC'S official position on the topics covered. Next slide, please.

And I'm excited to introduce today's presenter, Miss Rhiannon Clifton. Rhiannon is a dynamic leader with over 20 years of expertise in strategic leadership, project management, and training and development. She is currently the senior director of the Clinical Laboratory Development Program at the University of Illinois system.

She excels in building and scaling new programs previously with the Shield Illinois. The business was scaled from 50 employees to over 1,200 during the pandemic, focusing on stopping the spread of SARS-COV-2 in Illinois and getting kids back to school and businesses open. With a passion for fostering collaboration and achieving organizational excellence, Rhiannon is eager to share her insight on new

workforce development program to broaden the laboratory professional pipeline; our speaker for today, Mrs. Rhiannon Clifton.

Thank you so much, Alicia. It's a pleasure to be here. All right, next slide, please. Thanks again for having me. As Alicia said, I'm Rhiannon Clifton, with the U of I system. And today, I'm here to talk about the challenges we faced in workforce development and scaling during the pandemic, how we addressed them, and how we can use our learnings to be prepared for future public health emergencies. Next slide. As mentioned, I was previously at Shield Illinois. Shield Illinois is a non-profit testing organization that was founded by the University of Illinois system in July 2020, once the COVID Shield assay was developed at the University of Illinois Urbana-Champaign to help deploy the test across the state and help prevent the spread of COVID-19. At the end of that, we had over 7 million tests that we processed at over 2,000 total testing locations, which included nearly 1,800 K-12 schools and protected over 1.1 million K-12 students and staff that were given access to that statewide testing program. Next slide, please.

So at Shield, we started from 0, one person who was volun-told to help lead this and scaled very quickly, due to several keys to success here. Originally, we had thought that a lab-in-a-box model would work, and we could ship the equipment, consumables, SOPs, everything necessary to process this new and novel test, and quickly realized that was not the case. So we had this easy low-cost test.

We needed statewide logistics to ensure a fast turnaround. We wound up with a really great integrated technology platform. Our organizational partnerships helped us along the way. And we had all of this under the umbrella of a trusted brand with the University of Illinois system. Next slide, please.

And we had to fix the problem very quickly in order to increase testing adoption throughout the state, even though the test was offered for free through partnerships with the Illinois Department of Public Health, as well as the Midwest Coordination Center, that was funded by the federal government. We still needed to help people with these tests. So at the height of testing, we had over 325 internal employees and well over 1,000 contractors from six different companies in our testing locations.

We needed to staff all of these areas very, very quickly across an entire state with different skill sets involved. So we were spinning up entire departments on a dime as the virus surge and demand soared. Next slide, please.

All in the environment of some tenets central to our mission, which were an equitable statewide program. We needed to staff across the state to cover those higher education institutions, K-12 schools, free community testing, and locations, especially that were testing deserts, particularly for under-resourced individuals. And we also were testing at companies to keep production lines open, food production going, things like that.

We needed specimens to get to the labs efficiently and balance across our labs. And we needed to have efficient testing protocols in order to keep that turnaround time low, so that people could get their results in time to make a difference in their behaviors and slowing the spread, all in a changing testing needs environment as things like new variants came, and outbreaks were prevalent.

We also were sequencing COVID tests for variant identification, and the increase in wastewater testing, in general, was something that we were looking at as well, so lots of change. My favorite phrase from that time was, our only constant is change. And that certainly bore out. Next slide. Whoops, OK, yeah, sorry. So in less than six months, we were able to spin up on-site teams and mobile collection, a separate mobile collection team that would respond to outbreaks. We had a supply chain secured in a very tumultuous time for supply chain. We built a statewide transportation network. We had our HIPAA

compliant technology system with the ability to track samples from the collection site to our processing center, to the lab, and through the testing process.

We had 10 CLIA labs networked together and a 24/7 customer and collection site hotline. So we were able to build it very, very quickly. Next slide.

And this is what it looked like. So our labs were distributed throughout the state, as you can see on the left, the beaker symbols. There's one. There are a couple, I think, behind those green circles that indicate a drop site for tests for our K-12 partners.

And then on the right side, you can see all of the testing sites that we had across the state. So really getting those samples in getting them to the lab and then high quality testing and quality control meant that those tests were turned around quickly and accurately to the folks throughout the state from everywhere from the federal courthouse, to K-12, to lots of places in between, to keep the state going. Next slide, please.

So how did we do that? We really left no stone unturned. As I mentioned, we partnered with outside contractors. We had six companies that trained their own staff to do collection. It did not need to be done by a medical professional with the way that we set it up. So anyone over the age of 18 could be employed in that endeavor.

We really relied on employee referrals at schools. We were asking them to outreach to families who might need a part-time job. And that was a great way to get folks from the community involved.

The CDC Foundation funded several dozen positions for us and helped us recruit as well. And we did a lot of crossover training and internal movement of staff, based on skills and need, so that if we had an outbreak in our own staff, we could move people around in order to still get those test results in and out on time. Next slide, please.

And what that meant is that we had a lot of folks from different backgrounds with different levels of training and different skill sets. And so we needed to make professional development a priority, which we did. We have, obviously, as being the U of I system, we have some academic partnerships that allowed us to offer things like leadership or data analytics certificates.

We have a group that is doing research about the pandemic. And many of our employees were able to get institutional research board certification to help with that, did things like personality strengths assessments, free access to Coursera and LinkedIn Learning, and very importantly, diversity, equity, and inclusion and belonging classes and a certificate program in that as well. And that led to our staff being able to get trained quickly and also, have those essential skills and professional skills that allowed them to work together in this mission. Next slide, please.

Here's a little bit of proof that's in the pudding. And I won't read the whole slide to you. And we will distribute this. But really, what this shows is that from everyone, from our people team who really took the commitment to professional development very seriously and helped to empower our employees to expand their skills and knowledge in critical areas such as leadership team building, diversity, equity, inclusion, and belonging, communication, even health and wellness.

We were working through a very difficult time, and individual health and wellness was also important. And so building those opportunities in-- and our employees did indeed express their gratitude for that. Other areas of success were by building a culture of learning and really helping our employees to understand that their personal and professional development were important to us and as important as our mission and ability to grow, to be able to take the time to study and increase learning in molecular biology and

other sciences, and as a manager seeing the impact that the commitment to professional development has had on staff, leading to more opportunities for career advancement and personal growth in our laboratories across the state.

Next slide, I've got a few examples of some particulars. is a medical lab scientist in our lab. She is originally from Armenia. And after completing her university studies, her scientific career in pharmaceutical research was put on hold when she immigrated to Prague in 2001 and then later, here to Chicago, where I'm at today, in 2013. In doing that, she completely changed careers, but never forgot her original dream of becoming a laboratory scientist and found that opportunity to pursue that dream at Shield Illinois.

She came in as a lab processor and was trained to receive, prepare, and process COVID-19 specimens. In addition to her hands-on training, she earned a Principles of Biochemistry certificate from Harvard University's online course. And that and her training allowed her to move up to a scientist. She says about her story, I think my story shows that sometimes, old dreams can come true. And it is an amazing feeling. Next slide.

Here is Kenyatta. Kenyatta has served in the US Air Force for over 13 years and is an aspiring physician, with a bachelor's degree in health science. In 2021, during deployment, she was prompted to return home to spend more time with her grandparents. Once back in Chicago, she joined the Shield Illinois team as a laboratory scientist and began receiving that foundational laboratory and leadership skills training. She immediately felt welcomed and supported into the team and as a lab scientist, was given hands on instruction in laboratory techniques, protocols, and best practices in our state-of-the-art facilities. Upon her return from an unexpected deployment, she was encouraged to apply for a managerial position, leading to her subsequent promotion to the role of lead medical lab scientist. And we couldn't be happier. Kenyatta says, my goal is to get into medical school. Applications are going to ask about any leadership experience, and I'll be able to say Shield offered me that opportunity. Next slide, please.

And last, but not least, is Aubrey. Aubrey started in the Shield program as a processor and progressed to become a lead molecular technician, a Shield Illinois general supervisor, and eventually, now a manager at Loyola Medical, thanks in part to the skills and opportunities provided by Shield and our current lab director, Natalie Lubbers. In her own words, she says, Shield has not only transformed my career, but also, my outlook on what is possible. It has empowered me to embrace new opportunities, achieve beyond my expectations, and make a lasting impact in the field of molecular biology. So next slide, please.

So as you can see, we've had a dedicated effort toward professional development and recognizing the goals of our lab staff and helping them to get there. On the public health emergency side and the COVID side, Shield Illinois did close testing operations in June 2023. In doing so, though, we worked with four-year universities statewide to distribute our PCR and other related equipment for future viral response, including five years' maintenance coverage on the equipment, which keeps 30 high throughput PCR machines in the state and active.

When we started this effort, we did a quick poll around the state to see how many PCR machines were available and found that there were four throughout the state. So we definitely wanted to increase that, in case there was another public health emergency in the near future. So that will serve as a hub-and-spoke laboratory structure throughout the state, should we need to switch to public health emergency response. And Shield Illinois's lab at the University of Illinois Chicago will be that hub of the hub-and-spoke model.

And in the meantime, we are focusing on providing access to testing, but also, workforce development. Next slide, please.

In that vein, we have established the Clinical Laboratory Development Program, which is designed to help solve the critical shortage of qualified clinical laboratory personnel. Our team will educate and train a diverse set of apprentices to make a fundamental impact across Illinois and, we hope, across the region and even the United States. Next slide, please.

As we were spinning up 10 labs across the state in the middle of a global pandemic, we happened to notice, as you may have, that there is a critical shortage of up to 25,000 medical laboratory professionals in the US, with only just over 300,000 practicing, or roughly 1 medical laboratory scientist per 1,000 people. Obviously, as you know, this affects companies, their employees, and very importantly, patients, who are affected by things like delays and turnaround time, errors and resulting and potentially inconsistent lab results. Next slide.

In our research, we found that the time to fill vacant medical laboratory scientist positions, 2/3 of labs said that it takes more than four months to fill these positions in microbiology. And that was of 2022. Next slide. And the primary reason for that is a lack of qualified applicants, with almost half of the responses denoting this as a reason. Next slide.

So our solution is to create a technical hands-on training program to increase that supply of indispensable laboratory professionals with a very keen eye on diversity throughout the program. So I will explain each of these in a little more detail as we go through the rest of the slides. Next? Next?

So again, we established and managed 10 clinical laboratories, paving the way for the program. Over the pandemic, we hired a first-rate, clinical laboratory leadership team; formed an effective cohort of our own apprentices, that we hired and continued and promoted and worked with for a couple of years; and then in that process, established policies, procedures, training, and competency modules for that on-the-job training, and continued competency.

For the program, training and assay processing will take place in our newly renovated, state-of-the-art \$3.5 million lab facility on the campus of the University of Illinois at Chicago. Here, we do molecular diagnostic processing, next generation sequencing. We have five real-time PCR instruments, and we are BSL-3 lab with 24/7 capabilities. So that will help us in training our aspiring lab professionals. Next slide, please.

Our laboratory capabilities include that competitive turnaround time, that I mentioned. We've got a great leadership team who has demonstrated time and again that they can process in a high throughput laboratory with great, accurate results. We have a high throughput, both diagnostic, molecular, and next-generation sequencing laboratory, which have a robust test menu and flexibility. Should there be testing that our partners are interested in, we can validate that and launch that for them.

We are a non-profit, being a unit of the University of Illinois system, and operate on a cost recovery basis, so are able to provide this learning opportunity for our apprentices in a manner that makes it so that we can do so without charging them any kind of tuition or fee for the program and, in fact, pay them for their time where they're learning with us. We also value high-speed resulting, with patient care in mind, as I mentioned. And finally, we hope to be able to offer access to testing for underserved populations through our continued relationship with the Departments of Public Health here in the state and also, hopefully, potentially, the FQHCs, that are here in the state as well. Next slide, please.

So this one-year clinical technician apprenticeship is a training program focused on the tactical-- pardon me-- aspects of being a laboratory tech, preparing motivated individuals from underrepresented lives for full time-- from underrepresented populations, pardon me, for full-time roles in the lab. They will have hands-on and both VR and in-person and online didactic sessions.

As I mentioned, this is a earn and learn model, where apprentices earn a full-time wage for their time, learning on the bench and in the classroom at the lab. Our great instructors and mentors, plus our curriculum that we've developed, and all applicable software licenses that the apprentices will have access to will enable them for a really robust learning experience and then, again, that state-of-the-art facility and equipment, where they'll be learning all the foundations of the lab training. Next slide, please. Again, the apprentices don't pay for the program cost or fees and will receive compensation. It's about \$25,000 per apprentice for the training program and is covered by the program and partners. Pay starts at \$18 an hour for moderate complexity and \$20 an hour for high-complexity testing. And UIC campus housing will be provided for apprentices who have need. They may be outside Chicagoland and not be able to afford temporary housing in Chicago. And so scholarships will be provided by our partners as well. Next slide.

During their time here at UIC, apprentices will be trained on the technical aspects of lab work, as well as troubleshooting, QA/QC, monitoring, and what we call essential skills. I don't like soft skills, so we are using that essential skills moniker there. And they will, because of this foundational training, arrive at partner labs, ready to contribute from, really, day one, as soon as they're onboarded on those lab processes. Next slide.

Each term, which start in January, May, and September, cohorts consisting of 40 to 50 apprentices will follow a rigorous one-year training schedule in the program. Partners will have preference option to select and place apprentices from each cohort into their own programs, allowing them to work toward the 52-week work experience needed for ASCP certification.

So the way that it works is they come to us for weeks 1 to 16, where they'll get those foundations. Then they will be placed, with agreement of our partner lab and the apprentices, at our partner lab facilities, where they might come in as a laboratory assistant, a non-certified technologist. It would just depend on that lab's HR policies, how they wanted to bring them in. And that would be for weeks 17 to 52, where they will continue their bench training. And they'll continue essential skills training with us for about two hours a week throughout the duration of the program remotely. Next slide, please.

Here is an overview of the training modules, both on the science and technology lab side, as well as the professional development modules. We'll go into a little bit more detail on the lab side in the next slide. But on the professional development side, you'll see the information that we had reflected in some of the feedback we'd gotten from the folks that we trained at Shield, as well as from research that we've been doing with our potential laboratory partners on areas of importance for them.

And here you see diversity, equity, and inclusion, communication, critical thinking, problem solving, professionalism, and teamwork. So they really will be ready to hit the ground running when they arrive at those partner labs and will have the training under their belts to do so. Next slide, please.

Here you can see our modules in both the high complexity and moderate complexity testing. And that will, again, happen in the first 16 weeks. There will be weekly assessments, that we will ensure that our apprentices are demonstrating comprehension and competency in each of their weekly subjects before they move on to the next one.

And so we're really ensuring their success and working with them if they cannot get something and working with them maybe as they develop through the 16 weeks. If they decide lab work is not for them, we'll help them in their next endeavors, but really, doing that monitoring and vetting of the apprentices for their next lab assignment. Next slide, please.

Here's just a little bit more about the modules that they'll be doing, both in the molecular testing, PCR, the laboratory training, and things like pipetting and accessioning, rejections, sample handling, robotics, things like that, as well as the certifications and training that they'll come out with. We also will work with our apprentices to produce a-- I like to call it a portfolio, but a hiring packet, if you will, with all of their certifications, their certificate of completion for that first 16 weeks, their transcripts, everything that they would need for someone to review upon hire, so that it makes it easier on the recruiting and hiring staff at the labs that they're applying to after the program ends. Next slide, please. Next slide?

And I've mentioned our staff. The lab is led by medical laboratory professionals with extensive experience in processing high-complexity assays in CAP and CLIA labs, developing employees, training them in the latest methods and best practices of laboratory sciences. We have a diverse laboratory leadership team-- laboratory leadership team-- pardon me-- that are experts in their fields. And that 1 to 1 apprentice to trainer ratio provides individualized feedback and mentorship. And we will have industry experts and academics deliver course sessions in technical and non-technical topics.

I want to pause here for a moment just to clarify one thing, is that our program is not an academic one. There's no course credit or degree associated with it. It is really focused on that workforce development and getting people aware of and into the lab career pipeline, rather than the academic degree or certification or master's degree, or what have you. There are programs within the U of I system and elsewhere that address that. And we will also work with our apprentices, should they want to continue their education, to identify the great options out there and programs that might work for them. Next slide, please.

And here is our laboratory leadership team. Natalie Lubbers is our director of lab operations and technical supervisor. She was in charge of our 10 labs through the Shield program. Dr. is our CMS 116 lab director. Dawn Barding has extensive experience in hospital labs and is our associate director of lab operations; Brianna Kelly, our innovation-- or our next-generation sequencing lab manager.

Kylie van Niekerk is our molecular diagnostics lab manager, and Amanda Washington is our lead of laboratory logistics. We are so fortunate to have such a great team that is really excited to teach and mentor these apprentices and get them as excited about careers in the laboratory as we all are. And next slide, please.

So this team was able to train and-- well, recruit, hire, onboard, train, work alongside about 200 lab professionals throughout our time at Shield from urban and rural areas across the state. And you can see here that they were trained in the kinds of things that we were saying we will have in our training program as well. Next slide, please.

As I said, diversity is incredibly important to the program of our cohort knot, which we refer to as our final group of lab professionals that we had and that rolled off at the end of our testing operations. There were 50 apprentices, 3/4 of which were female. And you can see the breakdown of demographics here. We really, really have diversity at the heart of our mission and will continue to do so as we recruit apprentice candidates for the Clinical Laboratory Development Program. Next slide.

I want to turn our attention a little bit to how you may be able to get involved with the program, if you are interested. Next slide. Our team is absolutely phenomenal and amazing. But obviously, we can't do this alone. So as I've mentioned throughout this presentation, we are in the process of developing partnerships to support the program, of folks that may be interested in recruiting apprentices to their organization and/or outsourcing assay processing to us.

We also are consistently looking for feedback of the direction of the program as things change in laboratory diagnostics in the environment overall in public health. We definitely want feedback of what is valuable in terms of medical laboratory professional development and workforce development. And there's an opportunity to co-develop assay training with us, so that if a lab was hiring apprentices out of our program, they could be trained on specific assays that are important to that partner lab. Next slide, please.

And what that looks like is, as I mentioned, our suggested sponsorship to organizations per apprentice is \$10,000 of that 25. And the housing scholarships are \$6,000 each. We are working with our partners on developing those sponsorships and partnerships that really benefit both the program and our apprentices, as well as those labs and hospitals. The other piece that is critical for our success and path forward is the outsourcing of molecular assays to the lab, which we will process them as part of the curriculum.

I like to refer to them as our textbooks, so to speak, if you were thinking about an academic program, where we want to be able to train our apprentices on the bench. In order to do that, we want to have clinical diagnostic testing that they're learning from. And it's important to note, they will not be processing clinical samples on their own. They will be shadowing very closely one of our bench scientists throughout their bench training.

They won't be releasing results or anything like that and would need to be CLIA competent to do that at their partner labs. But again, we are a CLIA-certified lab. And it was designed as a high-throughput PCR and genomic sequencing facility. And we're very adaptable to testing that our partners would like to outsource to us. Next slide.

This is just an example of our assay capabilities. We have GI. We have non-invasive prenatal testing, which is an area we're very interested in expanding, to be able to provide that to all expectant mothers. And we have respiratory and STI, as well as well as some wastewater, salmonella, other more public health testing capabilities as well.

Again, here, these are some of the things that we could do and can do. And if a lab were to be interested in a different kind of test or different kind of testing, we would certainly validate that or cost that out and look at turnaround times, to see if we could help. In the end, the patients get that high-quality and quick test result, that we all are striving for. Next slide.

That's me. So at this point, I will turn it back over to Alicia for a question and answer session. Thank you, all, so much. And I appreciate, again, your time and that you were here to hear about this program.

OK, yes, we will take a few minutes to answer as many questions as possible. If we don't get to your question today, feel free to send it to our OneLab mailbox. It's OneLab@cdc.gov.

OK, we have quite a few. And I noticed that there are quite a few questions asking about certification. Will they be able to sit for a certified or a certificate? And what specific area would they be able to sit for? Great question, thank you. So the program is designed-- we will train them on the bench in molecular, and we will also have didactic sessions in microbiology, blood banking, and histology. If they go to their partner lab and switch to one of those other areas or get bench training in that area, they would need to

get to the 52 weeks required. But the program is designed to give them as much of that 52 weeks that is necessary to sit for MBASCP certification or whichever of the areas of certification that they're pursuing and get them close to that.

We can't ensure that everybody would be ready at that 52 weeks, as people learn at different rates. But the hope would be that within several months after the program, they would be able to sit for certification, if they so desired, which we know that many labs still definitely want that and prefer that.

Let's see, we have a couple of questions, also. We have a few participants that are outside of the US. So one is in the Philippines, and I think the other one is in Pakistan. So do you actually offer the program to lab workers that are outside of the US?

That is a great question. At this point, we are focusing on those that are able to work legally in the United States. And I should mention that the apprentices, when they join us for the 16 weeks on the UIC campus, will be University of Illinois employees for the duration of the program, as well as employees of their partner lab that they go to. So they would need to be able to work legally in the United States.

OK, let's see. Is there a requirement for the trainees to commit to stay at Shield to work. After completing the program?

There is not. And in fact, we likely will not hire apprentices out of the program. It's really to broaden the pipeline for others. Our lab will remain a workforce development program. So we're not interested in expanding the lab to be a big commercial operation. We just want to be big enough to be able to teach the apprentices on the bench and then deploy them throughout the industry.

Someone wants to know, who are your partner laboratories?

We are chatting with laboratories, both the larger reference labs that have a national footprint, as well as hospital laboratories throughout the state and really, the region and the nation, from smaller hospital systems, all the way up through very large ones. And I'd be happy to discuss who our partners that are in the pipeline, if folks wanted to approach me offline about that.

OK. And let's see, someone wants to know, what are the prerequisites or degree requirements for to be able to enter the program?

Great question. So really, again, this is designed to increase the pipeline. So to get into the apprenticeship program, the requirements are that you are able to work for the University of Illinois legally, that you pass the University of Illinois's background check for employment, and that you have a high school diploma or equivalent. And that's for moderate complexity.

And then the high-complexity testing would be based on the CLIA regulations around that, so the biology and chemistry requirements. And we will review transcripts upon application to determine which track an applicant would be in, whether that be moderate or high-complexity testing.

OK. Let's see, I have two questions about testing. Someone asks, can the trainees produce test results? They cannot release results. They will be in that 1 to 1 bench scientist to apprentice teaching ratio. And then when they go to the partner labs, they would need to be declared competent in order to be able to release results there. And that would be up to the partner labs.

OK. Are you doing any microbiology culture testing?

At present, we are not. But we will have didactic sessions in microbiology.

OK. I'm trying to scan. So some of them you answered. OK, I'm going to send a couple of these to you up there, based on what they said. I would like to know if you could really expand about the recruiting for underserved populations.

Absolutely. We have been working with the Department of Labor to get certified as an official apprenticeship. And they have resources for recruiting that we will be tapping into. And obviously, diversity and underserved under-resourced populations are important to them as well.

We are working with the two and four-year institutions from around the state on recruiting. And we are also looking at outreach to high schools, to help the high school students, their guidance counselors, and their science teachers understand laboratory is a career path, so helping build awareness for that as a viable career option; and finally, outreach to community-based and faith-based organizations throughout the state, to recruit folks and, again, help them become aware of laboratories as a career path.

And as we're working to lower the barriers to entry in terms of this training program, being that could maybe jump-start to a career in labs, really just hoping to expand awareness of that; so really, everything from high schools, all the way up through higher ed institutions, and everywhere in between, much like we did when we were staffing up Shield during the pandemic.

OK, I think these two questions will answer some of the questions that we had in the chat. How do you get samples from the partner labs? And what's the turnaround time for the assays?

Sure. That's a great question. So we will work with the partner labs to transport samples to our lab, either via career or shipping, depending on what the needs are and what the samples themselves dictate. And then as far as turnaround time, it would really depend on the test. And we would work with our partner labs to ensure that we are able to meet the turnaround time that they would need.

So it'd really depend on where the lab is, what that turnaround time needs to be. And then we would work on that transportation and delivery to our lab. And then we will have our LIMS able to connect with our partner labs systems, so that they can track those, as necessary, and all of that comes with that.

OK. There's a question about hospitals won't hire anyone who doesn't have ASCP certification. I think this helps with the question about apprentice, how they place after their next-- after the program is over, in their next lab.

Absolutely. So a lot of the professional development that we work with will be on job search. We'll make sure that our apprentices are trained in job searching, interviewing, all of that. But then we will, also, like I said, help them with their packets and help them understand where they may fit, if they're not certified, if they're sitting for certification, if they are in moderate complexity and could be a lab assistant; so working with them throughout the duration of the program on what's appropriate in terms of job search and then working with our partners as their hiring needs dictate, so that our apprentices are aware of placements at the partner institution.

So we don't have a requirement that XYZ partner has sponsored your seat, so you must work two years there, or anything like that. It is really an apprenticeship that then the world is your oyster, so to speak. Here are the oysters that are appropriate for you and vice versa, but really working to help our apprentices identify the laboratory environment and culture that resonates with them, and vice versa on our candidates, and their various certification levels, and ability to work in maybe a reference lab, versus a hospital lab, and doing our best to match-make there.

I'll follow up with this question. It goes back to certification. Has there been any kind of discussion with the board around this with your program, around certification? Have you had any conversation with ASCP? Not yet. I think that's scheduled for later this week or early next week.

So if we have participants that are interested in the program, or they have someone that they know that may be interested, could you share with them, again, how they could apply for the program?

Absolutely. So our application is on our website, which is at Uillinois.edu, just like in my email there, slash CLDP. And there's a link to the application, as well as some information around it. And then if anyone would like to get in touch with me about ways to be involved in a more robust fashion, I'm always happy to have a conversation as well.

All right, thank you, again, Rhiannon, for presenting today. This is a really great program. I wish I'd have known about something like this, and maybe I would have stayed as a laboratory scientist. But anyway, I can always go back.

Yes, we'd be happy to have you.

So I would like to again thank you.

I don't know if my mind is quite ready. Of course, now I wear glasses, so. Again, I want to say thank you.

As a reminder, the slides and the audio recording of this event will be posted in our website within two weeks from today and that, again, you can find that in the chat. It's at reach.cdc.gov.

Lastly, I would like to encourage you-- OK, thank you.

Oh, yeah.

No, no, no, I was just-- persistence. Last, I'll encourage you to utilize the OneLab inbox to share your training needs and feedback on OneLab with us. We use your input to select the event topics and better understand the community needs. The OneLab email address is posted in the chat for your access.

Again, I want to thank our presenter for today. And thank you, also, for joining us. And have a great rest of your day.